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CONFIRMATION NO. 2479

SERIAL NUMBER 10/501.639	FILING OR 371(c) DATE 04/13/2005 RULE	CLASS 002	GROUP ART UNIT 3785	ATTORNEY DOCKET NO. 4035.1000-003
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APPLICANTS

James R Miller, Milton, MA;

** CONTINUING DATA *****

This application is a 371 of PCT/US03/01477 01/16/2003 which claims benefit of 60/349,102 01/16/2002 *TP*

** FOREIGN APPLICATIONS *****

- None - *TP*

** SMALL ENTITY **

Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY MA	SHEETS DRAWING 6	TOTAL CLAIMS 15	INDEPENDENT CLAIMS 1
35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no Met after Allowance				
Verified and Acknowledged <i>James R Miller</i> Examiner's Signature Initials				

ADDRESS

21005

TITLE

Forelimb brace device

FILING FEE RECEIVED 260	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following.	<input type="checkbox"/> All Fees
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